

**EXHIBIT 5**  
**CERTIFICATE REGARDING INELIGIBLE CONTRACTORS**

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER  
INELIGIBILITY AND VOLUNTARY EXCLUSION FROM TRANSACTIONS  
FINANCED IN PART BY THE U.S. GOVERNMENT**

I, **James R. Van Epps**, **Senior Vice President and Project Manager**, hereby certify that  
(Name of Certifying Officer), (Title of Certifying Officer)

**PB Americas, Inc.** :  
(Name of Contractor/Consultant)

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation by any Federal department or agency or from participation in City and County of Honolulu Project No. SC-DTS - 1100131
2. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in Paragraph 2 of this certification; and
4. Have not within a three-year period preceding this proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

If any Principal Participant is unable to certify to any of the statements in this certification, such prospective Principal Participant shall attach an explanation to this certification.

I hereby certify and affirm the truthfulness and accuracy of the above statement, and I understand that the provisions of 31 United States Code (U.S.C.) §3801 et seq., (Administrative Remedies for False Claims and Statements) are applicable hereto.

**PB Americas, Inc.**  
Name of Consultant

**1001 Bishop Street, Suite 2400**  
Street Address

**Honolulu, HI 96813**  
City, State, Zip

**(808) 768 - 6157**  
Telephone Number

  
Signature of Certifying Officer

(Note: The above certification merely certifies that the Consultant and its subcontractors are not declared by the Federal Government or have not voluntarily declared themselves debarred, suspended, or declared ineligible from doing transactions with the Federal Government or any of its agencies.)